FINANCIAL PLANNING WORKSHEET Page							
ACTUAL	PROJECTED	REMARKS					
	SSN:	DATE:					
		RATE:					
		Select from pulldown menu.					
		Select from pulldown menu.					
		Reported (Actual)/PRD (Projected)					
		Select BAH from pulldown menu					
		Required to compute FSGLI.					
		Living with in act/away in proj.					
		Self, CMD, NMCRS, FFSC, Etc.					
		Select from pulldown menu.					
		Select from pulldown menu.					
		Enter TSP Contribution %					
		Enter Dollar Amount					
		Select from pulldown menu.					
STATEME	NT OF NET WORTH						
	LIABILITIES						
	Signature Loans						
	Auto Loans or Lease						
	Consolidation Loans						
	Student Loans						
	NEX/AAFES (Star Card)						
	Dept Store Credit Cards						
	Other Credit Cards						
	N&MCRS (Loan)						
	Other (Friends, Relatives, etc.)						
	Advance/Over Payments						
	Mortgages-Balances Due						
	Home						
	Rental Property						
	Other (Vac Hm/Trailer/Time Sha	re)					
	-						
	ACTUAL	ACTUAL PROJECTED SSN: SSN: STATEMENT OF NET WORTH LIABILITIES Signature Loans Auto Loans or Lease Consolidation Loans Student Loans Student Loans NEX/AAFES (Star Card) Dept Store Credit Cards Other Credit Cards N&MCRS (Loan) Other (Friends, Relatives, etc.) Advance/Over Payments Mortgages-Balances Due Home Rental Property					

NET WORTH		
Counseling Provided By:	1	
ocumoning Frontaca By:		
Counselor Phone #:		

MONTHLY I	NCOM	ΙE					Page 2
ENTITLEMENTS	ACTU			PRO	JECTED		REMARKS
Base Pay	\$	-		\$	-		
Basic Allowance for Housing (BAH I or II)	\$	-		\$	-		Select BAH from pulldown menu.
Overseas Housing Allowance (OHA)	\$	-		\$	-		·
Basic Allowance for Subsistence (BAS)		_	None	\$	-	None	Select F, P, R, N or C
Family Separation Allowance (FSA)	_	-	No	\$	-	No	Select Y=Yes or N=No
Flight Pay/Diving Pay/Flight Deck Pay		-		\$	-		
Submarine Pay			None	\$	_	None	N=N/A or select qualified years
Other Hazardous Duty Pay	_	-		\$	-		, and the control of
Sea Pay		_	None	\$	_	None	N=N/A or select qualified years
Taxable COLA		_		\$	_		, and the second
Other (tax exempt/allowance eg. COLA/FSSA)				\$			Non-tax, allowance line.
TOTAL MILITARY COMPENSATION (A)				\$			Non-tax, allowance line.
	\$	_		\$			Excludes pretax ded for TSP/MGIB
Taxable pay () DEDUCTIONS: (Use CheckBox to include allot	_		din a Di		_		Excludes pretax ded for TSF/MGIB
·			iding Pi				F / 10
ALLOTMENT	Ψ	-		\$	-	_	For/ends?
ALLOTMENT	Ψ	-		\$	-		For/ends?
ALLOTMENT	Ψ	-		\$	-		For/ends?
ALLOTMENT	Ψ	-	200	\$	-		For/ends?
ALLOTMENT	\$	-		\$	-		For/ends?
ALLOTMENT		-		\$	-		For/ends?
Meal Collection Deduction	\$	-		\$	-		
Family SGLI (For Spouses)	\$	-		\$	-		Amount from NetWorth Page
Servicemen's Group Life Insurance (SGLI)	Ψ			\$	-		Amount from NetWorth Page
Uniform Services TSP	Ψ	-		\$	-		Amount from NetWorth Page
MGIB	Ψ	-		\$	-		Amount from NetWorth Page
FITW Filing Status Actual: Ma 🔻 0 🔻	Ψ			\$	-		Proj Status: Ma▼ 0▼
FICA (Social Security)	Ψ	-		\$	-		Base Pay only, Excludes MGIB
FICA (Medicare)	\$	-		\$	-		Base Pay only, Excludes MGIB
State Income Tax	Ÿ	-		\$	-		State Claimed:
AFRH (Armed Forces Retirement Home)	-	-		\$	-		
Tricare Dental Plan (TDP)	\$	-	None	\$	-	None	None, Single, or Family.
Advance Payments	\$	-		\$	-		Ends:
Over Payments	\$	-		\$	-		Ends:
TOTAL DEDUCTIONS (B)	\$	-		\$	-		
CALCULATE NET INCOME Hide Add Backs							
Servicemember's Take Home Pay (A-B)	\$	-	\$ -	\$	-	\$ -	Divide by 2 for Payday amount.
Servicemember's Other Earnings (less taxes)	\$	-		\$	-		, ,
Spouse's Earnings (less taxes)	\$	-		\$	-		
ALLOTMENT	\$	-		\$	-		
ALLOTMENT	\$	-		\$	-		
ALLOTMENT		-		\$	-		
ALLOTMENT		_		\$	-		
ALLOTMENT	_	_		\$	-		
ALLOTMENT		_		\$			
Meal Collection Deduction	_	-		\$			
Family SGLI (For Spouses)	_	-		\$			
Servicemen's Group Life Insurance (SGLI)	_	_		\$	-		
Uniform Services TSP		-		\$			
MGIB	_	_		\$			
Tricare Dental Plan (TDP)	_			\$			
Advance Payments	_	<u>-</u>		\$			
Over Payments		<u>-</u>		\$			
Child Support/Alimony (Received/Income)	_			\$			
Other Income (e.g. SSI, Rental Income)	_			\$	<u> </u>		
TOTAL NET MONTHLY INCOME				\$			
TOTAL NEL MICHIEL INCOME	Ψ	-		ψ	-		

lote: Actual or Pro	SAVINGS AND LIVING EXPENSIFIED STATES IN SECTION OF SEC					Pag
SAVINGS	, solou : igui so ui s sui ilia is ilia i s speii	ACTUAL		PROJECTED		REMARKS
SAVINGS	Emergency Fund (1-3 Months)	AOTOAL		INCOLOTED	T	Monthly Contribution Amount
10% Minimum	Reserve Fund					Monthly Contribution Amount
	"Goal Getter" Fund					Monthly Contribution Amount
	Investments/IRAs/etc.					Monthly Contribution Amount
	TSP					
TAL SAVINGS	AND INVESTMENTS (10%)					Actual: Copy Ac
ING EXPENSES	` ,	ACTUAL	_	PROJECTED	_	REMARKS
AUTOMOBILE	Gasoline					
	Maintenance/Repairs					
	Other					
CHILD CARE	Allowances					
	Daycare					
	Support					Include Other Dependant Care
CLOTHING	Laundry/Dry Cleaning					miorado otrior poportadire otro
	Purchases (\$50 Monthly per Person)					
ONTRIBUTIONS	Charities (CFC/NMCRS)					
ORTRIBOTIONS	,					
	Club Dues/Association Fees					
EDUCATION	Religious		-		-	
LDOCATION	Books					
	Fees (Other/Room & Board)					
	Tuition					OLDIII (1207)
	MGIB					Montgomery GI Bill (MGIB)
FOOD	Dining Out					
	Groceries					
	Lunches					Include school lunches and lunches at work
	Vending Machines					
	Meal Deductions					
GIFTS	Holidays					
	Birthdays/Anniversaries					
HEALTHCARE	Dental					
	Eye care					
	Hospital/Physician					
	Prescriptions					
	Furnishings					
HOUSEHOLD	Maintenance/Repairs					
	Mortgage/Rent					
	Taxes/Fees					
INSURANCE	Automobile					
	Health/Life					Add additional insurance costs here.
	Homeowners/Renters					
	SGLI/FSGLI					Both service member and Family SGLI
	Tricare Dental					
JOB EXPENSE	Non-Reimbursed					
	Reimbursed					
LEISURE	Athletic Events/Sporting Goods					Include Spectator Sports
						include opeciator oports
	Books & Magazines					
	Computer Products (Software/Hardware) DVD/VHS & Video Games Rentals					
	DVD's & CD's					
	Entertaining					Danca Music C-# D-f T
	Lessons Toys & Games					Dance, Music, Self-Defense, Tutor, etc.
	Toys & Games					
EDSONAL CARE	Travel/Lodging					
ERSONAL CARE	Barber/Beauty Shop					ADO DOLLOGO
	Beer/Liquor/Wine					ABC, Package Store, etc.
	Other					
DET 0455	Tobacco Products					
PET CARE	Food/Supplies					
	Veterinarian/Service (Boarding/Grooming)					
UTILITIES	Cable/Satellite TV					
	Cellular/Pagers/Phone Cards					
	Electricity					
	Internet Service					
	Natural Gas/Propane					
	Telephone					Local = \$Long Distance = \$
	Water/Garbage/Sewage					
ISCELLANEOUS	ATM Fees/Stamps/etc					
	Other					Recommend \$50-\$150 Buffer
		_	_			

	INDEBTEDNESS (20%)										
	CREDITOR (ACCOUNT #/PHONE #)	PURPOSE	MO. PYMT	BALANCE	PROJ.PMT	REMARKS (MOS. BEHIND, PAID BY ALLOTMENT,	APR (%)				
1	US Govt.	Advance Pmts	\$ -		\$ -	Automatic Deduction					
2	Gov't Credit Card	Over Payments	\$ -		\$ -	Automatic Deduction					
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											
22											
23											
24											
25											
		TOTAL	\$ -	\$ -	\$ -						

	ACTUAL	PROJECTED
NET INCOME (Bottom of Page 2)		
SAVINGS AND INVESTMENTS (Near Top of Page 3)		
LIVING EXPENSES (Bottom of Page 3)		
AMOUNT LEFT TO PAY DEBTS		
DEBTS (Bottom of Page 4)		
SURPLUS OR DEFICIT		
DEBT TO INCOME RATIO		

ACTION PLAN

		PROPOSI	ED OPTIONS	
Increase Incon	e			
1.				
2.				
3.				
4.				
5.				
6.				
Decrease Livin	g Expenses			
1.				
2.				
3.				
4.				
5.				
6.				
Decrease Indel	todnooo			
	iteaness			
1.				
2.				
3. 4.				
4 . 5.				
6.				
o.				

REFERRALS/RECOMMENDED TRAINING							
<u>-</u>	_						
1.							
3.							
4.							
5.							
6.							

SETTING YOUR GOALS (SHORT TERM & LONG TERM)							
Goal	Cost	/ Date Wanted	= Monthly Savings to Reach Goa				
1.							
2.							
3.							
4.							
5.							
6.							

Use Take Home/Actual	Use Take Home/Actual SPENDING PLAN Page									Page 6			
TOTAL TAKE HOME PAY	\$ -	Month				Month				Month			
BY PAYDAY		1ST	\$ -	15TH	\$ -	1ST	\$ -	15TH	\$ -	1ST	\$ -	15TH	\$ -
P=Planned/A=Actual		Р	Α	Р	Α	Р	Α	Р	Α	Р	Α	Р	Α
Note: Subtract all savings	or living expe	nses deducted	d from pay (e.	g. TSP) or paid	d by allotment	t.							
SAVINGS AND INVESTMENTS	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
AUTOMOBILE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
CHILD CARE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
CLOTHING	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
CONTRIBUTIONS	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
EDUCATION	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
FOOD	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
GIFTS	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
HEALTHCARE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
HOUSEHOLD	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
INSURANCE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
JOB EXPENSES	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
LEISURE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
PERSONAL CARE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
PET CARE	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
UTILITIES	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
MISCELLANEOUS	\$ -	\$ -		\$ -		\$ -		\$ -		\$ -		\$ -	
CREDITORS:	Do not includ	de creditors pa	aid by allotme	nt (Use Check	Box to delete	creditors paid	d by allotment	s.)					
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TOTALS:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

MONTHLY SPENDING RECORD

Keep track of your daily spending for two weeks

Keep a record of how you spend your money for the next two weeks. The secret is to record it when you spend it. Using a "stickie" note in your wallet or purse will help you track your expenditures. When you go for your money make a note on your "stickie"; (put the amount and what you spent your money on). At the end of the day, transfer the recorded amounts to this record. Be sure to include bills paid, along with sodas, lunches, etc.

Remember this is for tracking your take home pay, don't include allotments.

TAKE HOM	IE PAY FOR TW	O WEEKS _		_	Dates _				
DATE:		DATE:		DATE:		DATE:			
ltem	Amount	Item	Amount	Item	Amount	Item	Amount		
DATE:		DATE:		DATE:		DATE:			
Item	Amount	Item	Amount	Item	Amount	Item	Amount		
DATE:		DATE:		DATE:		DATE:			
ltem	Amount	Item	Amount	Item	Amount	Item	Amount		
DATE:		DATE:		DATE:		Take	·		
Item	Amount	Item	Amount	Item	Amount	Home Pay Amount Spent Balance	+\$		

Keep a daily record like you did for the first two weeks. Remember to count ALL spending.

TAKE HOME PAY FOR TWO WEEKS	Dates	
-----------------------------	-------	--

DATE:		DATE:		DATE:		DATE:	
		ltem				Item	Amount
DATE:		DATE:		DATE:		DATE:	
		Item				Item	Amount
DATE:		DATE:		DATE:		DATE:	
ltem		ltem				Item	Amount
DATE:				DATE:		Take	
ltem	Amount	Item	Amount	Item		Home Pay +\$ Amount Spent -\$ Balance \$	(+ or -)

Use MO.PYMT	FullSteam: Debt Reduction through use of Power Payments			Page 9	
Balance	Payment	Rate	# of Pmts	Account	# of Pmts with FS
Total Balance					
Total Payments		W/O FullSteam			
FullSteamPayments		FullSteam Time			
Total Savings		Time Saved			
Total Interest					
FullSteamInterest					
Interest Savings					
Extra Steam					
1st Blast of Steam		in Month/Year			
2nd Blast of Steam		in Month/Year			
3rd Blast of Steam		in Month/Year			
ora Blast or Gleani		iii Mondi, real		<u> </u>	

TSP INVESTMENTS

10 yr	average	Contribution	Percentage
Government Securities	(6.04%)	100.0	0%
Fixed Income Index	(6.98%)		
Common Stock Index	(10.99%		
Small Cap. Stock Index	(9.7%)		
International Stock Index	(4.32%)		
10% Example	(10%)		
Total Distribution		100.0	0%

Current Contribution	\$ -
Current Age	
Years left to Contribute	
Investment Yrs until 59.5	59 1/2
Total Contributions	\$ -
Interest Earned on Investment	
TSP Balance @ age 59.5	

